

Gardner-Webb University

Digital Commons @ Gardner-Webb University

Education Projects

College of Education

Summer 2022

Creating a Nonprofit Organization to Combat Health and Healthcare Disparities Impacting Black Women

Chernee M. Gerald

Follow this and additional works at: https://digitalcommons.gardner-webb.edu/education_projects



Part of the [Education Commons](#)

Consultancy Project & Report

Organization: Gardner-Webb University College of Education

Project Title: DEVELOPING A NONPROFIT ORGANIZATION TO
COMBAT HEALTH AND HEALTHCARE DISPARITIES
IMPACTING BLACK WOMEN

Candidate: Chernée M. Gerald

Consultancy Coach: Dr. Jeffrey Hamilton

Defense Date: July 01, 2022

Authorized by: Kamille S. Jones, RAIN, Inc. Board Member

Approval

This consultancy project was submitted by Chernée M. Gerald under the direction of the persons listed below. It was submitted to Gardner-Webb University College of Education and approved in partial fulfillment of the requirements for the degree of Doctor of Education at Gardner-Webb University.

Dr. Jeffrey Hamilton, Faculty Advisor
Gardner-Webb University

05/27/2022

Date

Kamille S. Jones, Site Advisor
RAIN Board Member

05/27/2022

Date

Acknowledgements

I would like to give thanks and appreciation to my family for supporting me through this process. A special thank you to my aunts who began the important work years ago that motivated me to do research and develop an organization to help impact the community. And endless gratitude to the entrepreneurs and nonprofit subject matter experts I consulted with and learned from throughout this project.

Abstract

DEVELOPING A NONPROFIT ORGANIZATION TO COMBAT HEALTH AND HEALTHCARE DISPARITIES IMPACTING BLACK WOMEN. Gerald, Chernée M., 2022: Consultancy Project, Gardner-Webb University.

Adequate healthcare is essential to the lives of all Americans; however, disparities exist in the quality of care and services available to marginalized groups in this country. For many years, there have been conversations and research conducted around the health and quality of healthcare provided to Black Americans; more specifically, the quality of care Black women receive. At the forefront of healthcare factors impacting Black women are breast cancer, maternal mortality, and the implicit bias of healthcare providers. This project uses survey data collected from Black women in the Charlotte-Mecklenburg community to identify the most pressing health issues of Black women and the healthcare challenges they face. It explores plausible suggestions that may help alleviate some of those issues. In addition, this paper outlines how that data will be used to develop a nonprofit organization centered around education and support services for Black women in the local community.

Keywords: Black women, healthcare, breast cancer, implicit bias, nonprofit

Table of Contents

1	Introduction.....	1
1.1	Project Purpose	1
1.2	Project Qualification.....	1
1.3	Project Complexity and Impact Assessment.....	1
1.3.1	Project Complexity	1
1.3.2	Project Impact.....	2
1.4	Project Charter	2
2	Project Objectives	2
2.1	Outline of Partnering Organization’s Objectives.....	3
2.1.1	Objectives	3
2.1.2	Success Criteria.....	3
2.2	Outline of Student’s Objectives.....	3
2.2.1	Objectives	3
2.2.2	Success Criteria.....	4
3.	Project Scope	4
3.1	Definitive Scope of Work.....	4
3.2	Project Benefits.....	4
3.3	SMART Goals	4
4	Disciplined Inquiry	5
4.1	Introduction and Theoretical Framework	5
4.2	Hypothesis.....	5
4.3	Research Questions.....	5
4.4	Literature Review.....	5
4.5	Methodology	5
5	Continuous Improvement Systems	6
5.1	Continuous Improvement Planning	6
5.2	Continuous Improvement Actions	7
5.3	Continuous Improvement Feedback	7
5.4	Continuous Improvement Implementation	7
6	Deliverables	7
6.1	To Partnering Organization From Candidate.....	7
6.2	Deferred Deliverables	8
7	Communications Plan	8
7.1	Communications Plan Development.....	8
7.2	Stakeholder Engagement Plan	9
8	Risks.....	10
8.1	Mitigation and Contingency	11
8.2	Constraints	11
9	Budget.....	12
10	Analysis and Recommendations	12
11	Reflection.....	13
11.1	Professional Learning	13
11.2	Personal Development	13
	Appendix.....	15
	References.....	41

1. Introduction

1.1 Project Purpose

The purpose of this project is to create a nonprofit organization that provides health education and support services centered around identified health and healthcare concerns of Black women.

1.2 Project Qualification

Initially, I reached out to a few organizations and leaders I knew via email. I explained that I was seeking to help them solve an issue or problem within their organization. I did not receive favorable responses. I moved on to an idea I had been considering for some time. I wanted to transition the breast cancer awareness work I have been involved in for over 14 years into a nonprofit organization. To do that, I needed to determine if it was a viable idea for a project. I completed an assessment of the components of my idea. I assessed questions of whether the idea had a start and finish date and determined whether there was a specific problem that needed to be solved, resources needed, and tasks associated with the idea. I determined that the project would take 12 months to launch a nonprofit organization that aimed to impact breast cancer awareness through education. Also, the resources needed would be minimal: the cost of registering a nonprofit business in North Carolina, myself as the founder/director, available research on women's health, and a social media account. For additional guidance, I partnered with known business owners and nonprofit organization board members for assistance and knowledge transfer throughout this process.

Although I had the knowledge of creating educational events and women's health education, this project would require an additional set of skills. Creating a nonprofit organization would enable me to assert myself as a leader, spokesperson, and creator. I would gain knowledge of the process of creating a business, funding a business, and being the sole decision maker. I expected to become a subject matter expert in nonprofit organizations and their functions to operate a successful organization and assist others in launching their own businesses.

1.3 Project Complexity and Impact Assessment

I utilized a project assessment tool to assess the complexity and impact of the project. A score was assigned to each category based on specific criteria. The project complexity assessment had a maximum of 24 points. The project impact assessment had a maximum of 15 points. The overall scores for this project were 15 (complexity) and 11 (impact). I then followed the assessment matrix – impact scores on the x-axis and complexity scores on the y-axis with designated quadrants/colors indicating project type: *not a project* – yellow, *minor project* – orange, *medium project* – green, and *major project* – blue. I plotted the project's overall scores on the matrix. Based on the rise (complexity) and run (impact) of the overall scores, this project was identified as a medium project (green). A medium-sized project was ideal, as it ensured enough complexity and depth to be considered a project without being too complex where it could not be executed within the length of the program.

1.3.1 Project Complexity

There were six criteria to review to determine the level of complexity of this project. The six criteria were delivery timescale (in months), stakeholders, operational change,

contract complexity, in-house expertise, and dependencies. Each criterion was scored 1 through 4. The highest score of 4 indicated delivery time beyond 18 months, internal and external stakeholders, major change/large restructuring or outsourcing, contracts with new suppliers, no in-house expertise, and high dependency of other projects on this project.

This project's level of complexity was scored as follows:

- Delivery timescale (in months) – 6-12 months (Score: 2)
- Stakeholders – Internal and external (Score: 4)
- Operational change – Significant restructure of processes and work areas (Score: 3)
- Contract complexity – No new contracts required (Score: 1)
- In-house expertise – Have not done anything like this before (Score: 4)
- Dependencies – Very minimal links with other projects (Score: 1)

Overall score: 15

1.3.2 Project Impact

There were three criteria to review in determining the overall impact of the project. The three criteria were strategic contribution, return on investment (ROI), and operational effectiveness. Each criterion was scored 1 through 5. The highest score of 5 indicated direct impact to strategic theme, quick ROI, and significant improvement to organizational process.

This project's impact was scored as follows:

- Strategic contribution – Contributes directly to greater than one strategic theme (Score: 4)
- ROI – 1-2 years (Score: 4)
- Operational effectiveness – Improves work of whole department (Score: 3)

Overall score: 11

1.4 Project Charter Information

A project charter is “a document issued by the project initiator or sponsor that formally authorizes the existence of a project and provides the project manager with the authority to apply organizational resources to project activities” (Kloppenborg et al., 2018, pp. 20-21). The project charter is a high-level document that identifies general project information: project title, hosts, sponsors, project manager, and project description. It also specifies the purpose of the project, project participants and roles, and stakeholders. In addition, the charter highlights project deliverables, milestones, and objectives. Risks, project constraints, external dependencies (outside resources or people), and a communication strategy are also outlined in the charter. Finally, both the project manager and the project sponsor agree to the project details by signing the charter.

2. Project Objectives

The objective of this project is to register and develop a social impact (nonprofit) organization centered around Black women's health, provide health education and access to

healthcare resources, and establish an effective online presence with consistent content and engagement.

2.1 Outline of Partnering Organization’s Objectives

2.1.1. Objective

This project focused on developing a nonprofit organization that provides health education and resources to Black women to impact the overall health of Black women and combat the challenges they face in obtaining adequate healthcare.

This project was years in the making. I had previously assisted my family with breast cancer awareness events over the last 14 years, without having a formal structure or entity established. I was inspired to take the work I have been engaged in over the years and develop a formal organization that went beyond breast cancer awareness.

2.1.2 Success Criteria

The project’s success was predicated on its establishment and engagement with the community. Each step of the business development process was a success. The engagement with the community was measured by the number of followers it was able to attain through social media. Engagement levels were also measured through online algorithms and dashboards.

2.2 Student’s Personal Leadership Objectives

2.2.1 Objectives

Embarking on this project, I wanted to establish myself as a thought leader. I wanted to elevate myself as an influencer in the community. I wanted to be more self-aware. I needed to discover what leadership skills and characteristics I already possessed. To do this, I took three assessments: DISC Personality, Emotional Intelligence (EQ), and Strengths Finder. These assessments gave me some insight into the type of person I am, how I communicate, and the leader I could be. I used the insights from this assessment to identify my leadership skill deficiencies. These assessments revealed a “precisionist” style – a systematic thinker; a diplomatic, fact-driven communication style; and opportunities for social awareness. My top five strengths include input, responsibility, relator, analytical, and maximizer.

Based on these assessments, I set three leadership development goals to focus on throughout the duration of this project. My goals were transparency, influence, and communication. These were important in my development as a leader, particularly as a leader of a nonprofit organization where vulnerability is vital to connecting with women who may have health challenges and need assistance. Also, I needed to be able to build trust with women in the community and listen to their needs to provide the best support possible.

2.2.2 Success Criteria

I measured my leadership growth during this project by my communication strategy, the network I built while designing different aspects of the organization, and the growth of the organization. I needed to be more transparent and communicative to inspire and influence external resources to believe in the work I am doing and want to connect themselves to my brand. Ongoing strengthening of my communication, influence, and transparency skills will continue to be critical to the growth of my organization and its success.

3. Project Scope

3.1 Definitive Scope of Work

This project will develop a nonprofit organization targeting Black women to provide health education and healthcare services. This work includes

- register business name and obtain federal employer identification number (FEIN)
- formalize the business: mission and vision statements, logo
- social media marketing: establish accounts
- identify board members
- develop fundraising plan

3.2 Project Benefits

The main benefits of this project are

- legitimize the organization with legal documents
- increased followership through social media platforms
- increased awareness of factors impacting Black women's health
- repository of available healthcare resources in a centralized location
- funds availability to donate to external resources for further support and direct support to women in need

3.3 SMART Goals

Project goals are high-level statements that give an overall context to the desired outcome of the project. These goals should be SMART – specific, measurable, attainable, realistic, and timely. The initial goals for this project were developed and adjusted along the length of this project timeline based on additional ideas and constraints that caused changes in direction.

Goals for This Project

Goal	Deadline
Register new business name and obtain FEIN	5/31/21
Increase social media/online followers to 150	8/31/2022
Obtain network of local women's health-specific resources	8/31/2021
Research the healthcare needs of local women through survey	6/30/2021
Complete all administrative needs of business (i.e., logo)	8/31/2021
Develop fundraising plan	1/15/2022

4. Disciplined Inquiry

4.1 Introduction and Theoretical Framework

There have been many conversations and research concentrated on the health of Black Americans in the United States and the factors that impact their health. More specifically, Black women's health and the quality of healthcare services they receive have been topics of concern. The research conducted in this project was specifically designed to identify the health challenges and concerns Black women face in the Charlotte-Mecklenburg area. In addition, imagine what can be done to provide effective support through a health education-based nonprofit organization.

4.2 Hypothesis

Black women's health is being directly impacted by inadequate healthcare and health education.

4.3 Research Questions

The research seeks to identify the factors that contribute to the inequity in healthcare that Black women experience, the areas where Black women are suffering the most, and what support or services are needed to help alleviate the suffering.

4.4 Literature Review

The literature review provided a basis for the health and healthcare challenges Black women experience. This entailed reviewing over 10 journal articles, news and magazine articles, and news programs to determine the level of disparate impact/treatment that existed in healthcare. The research sought to identify the factors that contribute to inequity in healthcare that Black women experience, the areas where Black women are suffering the most, and what support or services are needed to help alleviate the suffering.

The research revealed common themes: implicit bias/racism, quality of care, breast cancer and maternal mortality, and healthcare access and community support.

As a supplement to the literature review, data were collected from a sample of Black women in the local community to provide a snapshot of the issues they are experiencing and to help answer the outlined research questions.

4.5 Methodology

For this research, an exploratory sequential design was used where qualitative data collection laid the foundation for quantitative data collection. The data collection began with document analysis, and casual interviews were performed. Document analysis is a qualitative tool that has been used for many years to obtain information on topics or subjects. Document analysis is a systematic procedure for reviewing or evaluating documents—both printed and electronic (computer-based and internet-transmitted) material (Bowen & Tisdell, 2009, p. 27). Common documents include official records, organizational promotional materials, letters, newspaper accounts, poems, songs, corporate records, government documents, historical accounts (Merriam, 2017, p. 163), and many others.

For purposes of this research, I reviewed other women's health surveys and studies and various public health documentation available online. In addition to the documentation, I relied on personal experience, oral stories that have been shared with me in the past and present, as well as informal interviews with known healthcare practitioners.

The qualitative research led to quantitative methods. Quantitative research is the process of collecting and analyzing numerical data. There are different methods of collecting quantitative data, such as online polls, surveys, and experiments.

Quantitative research designs are either descriptive (subjects usually measured once) or experimental (subjects measured before and after treatment). A descriptive study establishes only associations between variables (University of Southern California, 2021, para. 2), which is used in this scenario. To obtain information about Black women and their healthcare needs and concerns, I used previously collected qualitative data to create a survey.

Surveys have been used since the turn of the 20th century to capture social issues. Surveys can contain qualitative and quantitative information. Today, surveying is a primary approach to collecting new data. Surveys can be any length and contain multiple choice questions, open-ended questions, or Likert scales. The survey used in this study was created via Qualtrics, is completely anonymous, and is intended for online use only (a printed paper survey was not provided/collected). The survey included 14 questions specific to health education, advocacy, and support services plus three demographic questions (that act as controls in the event the survey ends up with the wrong audience).

The audience for this online survey was Black women in the Charlotte-Mecklenburg and surrounding area in North Carolina. This is a purposeful sample, meaning they have been selected based on their characteristics and the objective of the research study (also known as a nonprobability sample). To obtain a large sample size, the snowball sampling technique was used. With the snowball sampling technique, participants are asked to assist researchers in identifying other potential subjects (Oregon State University, 2017, para. 1). I first identified 10 Black women to participate in the survey and then asked that they identify as many Black women as they could to participate in the study. This enabled me to disperse the survey link to a larger audience. The survey link was available for 3 weeks. The intent was to review the data for the health concerns and service needs that occur most often (mode).

5. Continuous Improvement Systems

5.1 Continuous Improvement Planning

The organization will embark on a 2-phased approach; Phase 1 being to provide Black women with health education and healthcare resources to help thwart the negative impact of inadequate healthcare and lack of knowledge Black women have experienced. The plan is to develop a nonprofit organization that addresses the health challenges Black women encounter and recommends services that can assist them. The plan has been implemented. The nonprofit organization has been registered and named Bet.Her Health, Inc.

Phase 2 of the approach is implementing a fundraising plan and donation structure to ensure all funds are allocated appropriately. Collecting and distributing funds from donors must follow all Internal Revenue Service (IRS) regulations for nonprofit organizations.

5.2 Continuous Improvement Actions

Bet.Her Health, Inc. has been established, and a communication plan has been implemented to reach as many Black women as possible in the local community and other communities within the social media network. The phased approach is being applied. Identifying donors, grants, and other fundraising ideas will be considered and implemented where possible in 2022. In addition, the IRS tax-exempt designation (501c3) application will be submitted to ensure all donations are free from taxation.

5.3 Continuous Improvement Feedback

Bet.Her Health, Inc. has identified potential board members to serve on the organization's board. Those board members have experience in the nonprofit sector and will be able to hold the organization accountable to its mission and vision. Feedback will be solicited from board members monthly.

5.4 Continuous Improvement Implementation

Connecting with the Black women in the local community and feedback from board members and other knowledgeable resources are crucial to execution of the plan. The organization itself cannot successfully fulfill its vision and mission without engaging with and obtaining support from the Black women in the local community. In addition, as an inexperienced business leader, the knowledge of those who have worked in the nonprofit sector and experienced business owners is important to the proper growth of Bet.Her Health, Inc.

6. Deliverables

6.1 To Partnering Organization From Candidate

All key deliverables for this project were expected to be delivered within the first year after the project charter was agreed upon. Each deliverable is imperative to the creation of Bet.Her Health, Inc. These deliverables were the crux of the project.

The key deliverables for this project are

- name and register business with the state
- obtain tax identification number
- create mission and vision statement
- design logo
- identify potential board members and create bylaws
- establish social media presence
- collect data – survey Black women in local area
- apply for 501c3 designation

6.2 Deferred Deliverables

There were deliverables during this project that were believed to require additional time and attention; thus, these items were removed from the initial deliverable list and are planned to be introduced by the end of 2022. The focus of the project was to create a recognizable brand that provides healthcare education and resources to Black women in the local area. Per the data collected, social media is the most impactful method of obtaining information, not a website. Also, a fundraising plan must be in place to determine where and how funds received will be distributed. That requires more attention and planning.

These were excluded from the deliverable list:

- website development
- donation collections

7. Communications Plan

For this project, it was important to keep all stakeholders informed of progress salient to their involvement. There were several stakeholders to consider throughout the project. Each stakeholder was provided with specific information and appropriate times throughout the completion of the project (development of the organization).

Stakeholder	Information Needed	When will they get it	How will they get it
Owner/Director	Detailed knowledge of the organization; operations and donor information/resources	Already have knowledge of organization	Developed by owner
Community	The name and purpose of the organization; education and health information	Weekly	Social media posts
Donors* (To be executed in Phase 2)	Purpose of the organization, mission/vision; allocation of donated funds	Weekly, Monthly	Social media posts and potential newsletter
State/Federal Government	Name of business; business purpose; Articles of Incorporation, Tax implications (Tax status)	Already registered and established 5/2021 - name change (originally submitted 8/2020)	Articles of Incorporation have already been filed via the NC Sec of State website and FEIN online application has been filed and accepted.
Project Sponsor	Project progress	Once per semester	Project Status Reports submitted

Note. *Donors are part of a future communication plan.

7.1 Communications Plan Development

The purpose of a communication plan is to help target your intended audience in an efficient and effective way. A communication plan is not only a guideline for who to communicate to and what to communicate, but it is also an ongoing accountability tool for the organization. To communicate effectively, you must create a plan for what you want to say and what you may need to say it. A project manager must use effective communications to set and manage the expectations of all stakeholders as well as ensure that project work is completed properly and on time (Kloppenborg et al., 2018, p. 189). The purpose of this communication plan was to establish a presence in the community and educate the community on the health challenges that exist for Black women and ways to positively impact those challenges.

Prior to creating this plan, it was necessary to create and understand the objectives of the organization. Those objectives created a roadmap for what needed to be shared with stakeholders and at what time in the process.

Throughout the project timeline, various pieces of information needed to be shared. The project sponsor needed to know the status of the project, roadblocks, and inquiries. The state and federal governments needed to receive Articles of Incorporation, registration fees, and other legal documentation. The main stakeholders, the community, needed to be informed of what the organization was, its purpose, and information about women's health and well-being.

To determine the information that needed to be shared with stakeholders and how that information was shared, I leveraged the survey data collected from the community and internet resources. All official documentation – business registration, fees, etc. – was available online, searching for state and federal requirements for nonprofit organizations, as well as conducting a search on the necessary components needed to start a business in the state. Also, the survey data revealed the best method of communication with the community. A majority of the sample chose social media as their source of choice for news and information. From that, I believed the best and most effective way to reach my audience with information would be through social media; more specifically, Instagram.

When benchmarking other nonprofit organizations, I was able to see when they made social media posts, which aided in selecting the frequency of communication for this project. Engagement with the community is most important to the growth and disbursement of the message of the organization. I wanted to communicate frequently to create as much interaction as possible.

7.2 Stakeholder Engagement Plan

A stakeholder engagement plan outlines how project teams “will effectively engage stakeholders in planning and performing the project based on the analysis of the stakeholders’ needs, wants, and impacts” (Kloppenborg et al., 2018, p. 184). The stakeholders for this project were identified based on their level of interest in the project, overall project impact, and the information exchange that needed to occur between them and the organization. The chart below outlines the list of stakeholders and their relevant importance to the project. The most important stakeholders are the owner and the community. The relationship between the two determines the overall success of the project (organization).

Stakeholder	Level of interest (low>medium>high)	Ability to impact (low>medium>high)	What we want from stakeholder	What stakeholder wants from us	Organizational cross-over with stakeholder
<i>Owner/Director</i>	High	High	To develop organization-register, design, and launch organization	Same	Engage w/all Stakeholders
<i>Community</i>	Medium	High	To engage with organization via social media and other platforms.	To provide accurate health information and reliable support services when applicable.	Engage w/Owner
<i>Donors</i>	Low	High	To donate funds to assist in supporting others in the community who need support.	To be transparent about the services provided and how funds are distributed.	Engage w/Owner
State/Federal Government	Low	Low	Confirm legal entity	To follow regulatory guidelines for nonprofit business activity.	Engage w/Owner
Project Sponsor	Medium/High	Low	To be available for questions/clarification of requirements, suggestions, etc.	To provide status reports and planning materials on time and complete all requirements for each phase of the project in a timely manner.	Engage w/Owner

8. Risks

There may be many risks involved when embarking on a new project or idea. There are external factors (i.e., political, economic, social, technological, legal, environmental) that could have an impact on your organization, project, or idea. For this project, potential risks were identified early with contingencies put in place, if needed.

8.1 Mitigation and Contingency

Risk Description	Mitigation Plan (what to do to avoid the risk occurring)	Contingency Plan (what to do if the risk occurs)	Impact (what the impact will be to the project if the risk occurs)	Likelihood of occurrence (e.g., %, or high/medium/low)
Regulatory compliance – State/Federal business requirements	Ensure that all required documents (taxes, registration fees, Articles of Incorporation, etc.) are filed and maintained in accordance with the law.	Correct any errors and resubmit required information	The company will be closed	Low
Fundraising ability – new organization; needs to establish credibility	Develop a fundraising plan that details how donors will be targeted and how funds will be distributed. Create a donor list.	Focus on organization’s brand and presence in the community, then introduce fundraising	The organization cannot provide financial support to women in need or donate to other resources without funds	High
Market oversaturation – too many women’s health organizations	Create content that is presented in a unique way	Pivot away from broad healthcare education to a one targeted issue	It will force the company to pivot from its vision/mission	Low
Misrepresentation or misinformation distributed from the organization	Ensure information is provided from reputable, validated sources (i.e., health studies, healthcare professionals); fully vet resources	Retract unclear or inaccurate information immediately and re-validate sources; seek more credible sources	This will negatively impact the credibility of the organization and could cause a complete shutdown	Low/Medium
Technology failure – social media accounts hacked	Use secure passwords and devices; actively review activity on accounts	Report any abnormal behavior, shut down existing accounts, and restart with new profiles	It would force a shutdown of all accounts and online engagement would have to start over	Low/Medium

8.2 Constraints

Project constraints are any conditions that may limit the project, such as resources, personnel, or schedule. The main constraints in this project were time, internal resources, and funding.

There were certain aspects of the project that were dependent on external resources to complete. For example, the business registration and tax identification approval processes were dependent on the state and federal governments. Once that process was complete, the company logo and social media accounts could be established and legitimized.

Also, limited internal resources caused delays during the project. There is only one person responsible for creating content, verifying information, submitting documentation, and following the overall process and plan of the organization. There was no option for disbursement of tasks. In addition, all funding became the responsibility of the owner. There are fees associated with business registration and professional logo designs. To save financial resources, much of the creative content (logos, social media posts, other designs) were created by the owner. Funds were not available for professional designers.

9. Budget

The budget for this project was \$1,500. The actual funds spent were \$180. The project budget was based on perceived costs of business creation (registration, logo, etc.), branding, and marketing. The actual cost of nonprofit business registration for the state of North Carolina was \$60. The logo design and social media content were designed through Canva, an online design and publishing tool, at no cost. The owner later upgraded the Canva design package to premium for \$120 annually. In total, the project was significantly under budget, as many available creative resources are without costs (i.e., Canva for content and logos, Wix.com for website design).

The budgeted items for this project consisted of one-time payments that will not occur again. The Canva cost is annual; however, once the organization receives approval for 501c3 designation from the IRS, the cost will be zero.

10. Analysis and Recommendations

Based on survey data, most of the women surveyed receive their health information from television (news, special programs) and social media. The most pressing health issues for Black women in the Charlotte-Mecklenburg community are breast cancer and mental health (depression and anxiety); in total, 55% of respondents. There were also concerns about having insufficient or no health insurance and disposable income to cover medical procedures (dental and vision included). Furthermore, the data revealed that women are challenged with having the confidence or feeling empowered enough to ask for second opinions when given a diagnosis, which creates further curiosity around whether women ask follow-up questions with their primary care physicians. Sixty-two percent of respondents acknowledged that if they were aware of available health education and support services, they would be extremely likely to use them. Nearly 30% of women surveyed expressed that their biggest concern when having medical procedures or health issues, in general, was lack of education (i.e., billing, the procedure, medications, etc.), with aftercare/caregiving being a close second (20%).

These results answered the questions of the concerns of Black women, the personal and healthcare-related inefficiencies that are impacting their health, and what may be able to be done to alleviate those inefficiencies. The recommendations are as follows:

- Develop an online presence for Black women to engage with for health and healthcare education through a nonprofit organization
- Create awareness of local women's healthcare resources and services and act as a repository for those services
- Focus online content and information on what is ailing the local community – breast cancer and mental health
- Conduct events that connect healthcare providers and health subject matter experts with the community for education and questions
- Generate interests and donors for the organization to assist women in need

11. Reflection

11.1 Professional Learning

With this project, I gained knowledge, became a better leader, and tapped into skills I did not know I had.

I have helped coordinate breast cancer awareness events for the last 14 years. I believed I had a good idea of the health challenges Black women faced. The research in this project showed me that many factors contribute to the disparate impact/treatment Black women experience with healthcare. I have learned that it is important to have a voice and to feel empowered to make decisions for yourself, especially when it concerns your health. Through data collection, I know Black women are challenged with much more than what we hear about on a regular basis (i.e., breast cancer). I have learned to dig deeper and research more and that the work I am doing is important and necessary in the community.

I am a better leader because of this project. Developing my own organization helped me understand the struggles leaders have trying to run a company, lead a team, and perform at a high level. Having that perspective enabled me to make decisions differently in the workplace and with this project.

Finally, this project uncovered skills I did not know I had. I became more creative and innovative throughout this project. Providing health education is great, but my aim was to share information in creative and bold ways. Every day, I think of creative ways to present information. Considering that my day job is in change management, it is helpful to bring innovative solutions and bring creative ways to conduct training.

Overall, this experience has changed my perspective on being a business owner (leader), a researcher, and a creative thinker.

11.2 Personal Development

Personally, my understanding of what it takes to be a leader has changed tremendously since beginning this program and this project. It is true that you can lead from any position. Leadership is not a title but an action. I have learned to ask more questions and consider contrarian views. Only seeking information from one source or type of source leads to confirmation bias. Confirmation bias does not give you the full picture of an issue. As a leader, you need to be able to see from all sides. I respect the leadership position more than

I have in the past. To be a good leader, you must be self-aware. You must learn to let others lead and be willing to develop others. Leaders put other people in positions to succeed.

This program has made me more self-aware of my leadership ability. I initially did not consider myself to be a leader, but now I am leading a business of my own and being influential in my community. After taking various assessments throughout the program (i.e., DISC, Emotional Intelligence), I became aware of my opportunities for growth and have worked throughout the program to improve in those areas. My overall confidence in myself as a leader, personally and professionally, has improved because of this project and program.

Appendix A

Project Charter

1. General Project Information				
Project Title:	NonProfit Organization Creation			
Project Host(s):	Chernée Gerald			
Project Sponsor (GWU):	Dr. Hamilton			
Project Manager:	Chernée Gerald		Date: 7/1/2020	
Project Description	This project will identify the health disparities that are impacting Black women and create a nonprofit organization that provides health education and support services centered around those disparities that will that empower local and global Black women to become advocates for themselves and their families.			
2. Project Participants and Roles (add or delete lines as needed)				
	Name	Role	Telephone	E-mail
Project Manager:	Chernée Gerald	PM	7047566502	Chernee.gerald@gmail.com
Team Members:				
3. Stakeholders (e.g., those with a significant interest in or who will be significantly affected by this project)				
Chernée Gerald				
General Public				
State & Federal Government				
4. Project Purpose Statement				
Project Purpose Describe the need this project addresses				
The purpose of this project is to create a nonprofit organization that provides health education and support services centered around identified health and healthcare concerns of Black women.				
Resources Describe the resources made available by the project host for this project				
All past knowledge of the fundraising and annual educational event (14 years of breast cancer awareness fundraising and education); allocated funds to secure business name, logos, website				

Project Deliverables <i>List the high-level "products" to be created (e.g., improved xxxx process, employee manual on yyyy)</i>	
<ol style="list-style-type: none"> 1. Register business name/logo 2. Draft bylaws 3. Establish team/Board 4. Obtain FEIN 5. Survey target population to identify needs 6. Create social media presence 7. Develop fundraising plan/strategy 8. Establish bank account 	
Project Milestones <i>Project significant accomplishments anticipated over the life of the project with estimated timeline</i>	
<ol style="list-style-type: none"> 1. Charter approval- 7/1-7/31/2020 2. Project kickoff- 8/1/2020 3. Business name established and registered- within 3 months of kickoff 4. Establish mission/vision/values- within 3 months of kickoff 5. Website developed and running- within 3 months of kickoff 6. Social Media presence, establish following- within 3 months of kickoff 7. Additional funding raised- within 6 months 8. Board/Team established- 8/1-8/30/2020 	
Project SMART Objectives <i>Include 3 to 5</i>	
<ol style="list-style-type: none"> 1. Register and develop a social impact organization centered around Black women's health 2. Provide women's health education and acces to healthcare resources 3. Establish an effective online presence with consistant content and engagement. 	
Major Known Risks (including significant Assumptions) <i>Identify obstacles that may cause the project to fail.</i>	
Risk	Risk Rating (Hi, Med, Lo)
Registration/FEIN not granted	Lo
Inability to raise funds	Med
Oversaturated market for breast cancer organizations	Hi
No previous experience establishing a business	Med/Hi
Constraints <i>List any conditions that may limit the project team's options with respect to resources, personnel, or schedule (e.g., predetermined budget or project end date, limit on number of staff that may be assigned to the project).</i>	
<p>Funding</p> <p>Timing: approval process for business, creation of logo, website, etc.</p> <p>No disperement of tasks; sole person responsible</p>	
External Dependencies <i>Will project success depend on coordination of efforts between the project team and one or more other individuals or groups? Has everyone involved agreed to this interaction?</i>	
The project depends on one person, who has accepted the responsibility of completing the project.	

5. Communication Strategy (specify how the project manager will communicate to the Host, Sponsor, Project Team members and Stakeholders, e.g., frequency of status reports, frequency of Project Team meetings, etc.)

Project manager will do quarterly check-ins with Sponsor for larger items via Zoom/onsite or email, if virtual/onsite meeting is not available. PM will email Sponsor with any immediate needs, questions or challenges.

6. Sign-off

	Name	Signature	Date (MM/DD/YYYY)
Project Host	Chernée Gerald	<i>Chernée M. Gerald</i>	07/01/2020
Project Sponsor	Kamille Jones	<i>Kamille S. Jones</i>	06/02/2021
Project Manager	Chernée Gerald	<i>Chernée M. Gerald</i>	07/01/2020

7. Notes

This project may be split into two phases: 1) Organization development and education and 2) Donations/Fundraising post brand establishment.

Appendix B

Project Scope/Goals

CONSULTANCY PROJECT SCOPE, DELIVERABLES, SMART GOALS				
Student Name	Chernée Gerald	Project Name	For Impact Company Start-Up	
Key Deliverables (including benefits) of this Project*				
Re-name/restructure business – To aid in proper separation of education and funds				
Mission and Vision – Gives the company purpose and path forward.				
Marketing – To establish and reach target audience				
Establish Board – Establishes accountability for the organization.				
Fundraising – Generates funds to provide support services for women in need.				
Functionality/Feature Explicitly in Scope*				
	M	S	C	W
Register New Name	X			
Reorganize company -main/fundraising	X			
Logo designed		X		
Establish social media presence		X		
Identify potential board members			X	
Develop fundraising plan			X	
Functionality/Features Explicitly out of Scope*				
	M	S	C	W
Website development		X		
Register for 501 (c)3 designation			X	
<ul style="list-style-type: none"> - Must Have – the functionality that is essential to meeting the key organizational needs and realizing the proposed value; without this functionality the entire project would be pointless - Should Have – the functionality that is important to meeting the key organizational needs and realizing the highest value, but which may be deferred to the next version/release - Could Have – the functionality that would add organizational value and would be useful to have, but which may be deferred to a later version/release - Won't Have – the functionality that adds limited organizational value and may be deferred indefinitely 				

*based on the Project Charter document

Appendix C

Project Budget & Resources

Project Name: Develop Women's Health NonProfit Combat Health
and Healthcare Disparities Impacting Black Women

NonProfit Name: BetHer Health, Inc.

Project Owner/Manager: Chernée M. Gerald

TASK	BUDGET	ACTUAL	VARIANCE	NOTES
Create Business				
Register business name with the state	150	60	-90	
Register for EIN	150	0	-150	Funds not necessary to register
Marketing/Branding				
Perform data research/analysis	100	0	-100	Analysis completed myself
Logo design	400	0	-400	Online tool; Canva is free
Create social media accounts	0	0	0	
Obtain social media followers/supporters	0	0	0	
Website design	250	0	-250	Free with use of online tools
Stationary	200	0	-200	Future costs of owner shirt, pens, cards, etc.
Identify content to share online	0	0	0	Free content available through medical facilities
Create content to share via social media	200	119	-81	Budgeting to work with artist for creative content; Able to create post myself with Canva Premium package
Business Operations/Organization				
Identify potential board members	0	0	0	
Apply for 501c3 status	0	0	0	
Fundraising (deferred)				

Develop fundraising plan	0	0	0	
Identify potential donors/sources of funds	0	0	0	
Conduct fundraising campaign	0	0	0	Utilize social media for marketing and word of mouth

Appendix D**Stakeholder Engagement Plan**

Stakeholder engagement plan: Bet.HER Health, Inc. – Nonprofit	
Project	Develop a nonprofit organization to provide Black Women’s health education and support services
Project Manager	Chernée M. Gerald
Organization	Bet.HER Health, Inc.
Date	6/14/2021

Introduction

The purpose of this project is to develop a nonprofit organization that provides health education and support services for women, specifically Black women, and other women in the global majority.

The objective:

To empower women to become advocates for themselves –“To encourage women to bet on themselves for better health.”

To generate funds to support the needs of the community.

To develop unique health education experiences.

Risks:

The greatest risks that the organization faces are not providing accurate information when educating others, not generating funds that help support the community and proper registration of the organization with local and federal government.

Requirements

The organization must be registered with the state and EIN obtained. It will be necessary to establish an online presence to reach stakeholders (public). The main source to reach the greatest stakeholder is social media. An Instagram account should be established to connect with the public and track engagement. It is necessary to identify potential Board members to establish a Board of at least three people to obtain 501(c)3 designation. This designation will allow for tax exempt status for the organization, making grants available to the organization, as well as allowing donors to give without tax implications.

Summary of previous stakeholder engagement activities relevant to this project

Organization (new) name registered with the state of NC 6/11/2021. (State government (NC))

EIN obtained 06/2021. (Federal government (IRS))

Instagram account established 06/2021 (For access to and engagement w/community)

Conversation with project sponsor 05/14 – discussed progress of project, areas of improvement and expectations on planning stage completion (End of Summer session- approx. 07/15/01. Next stage, Execution.

Stakeholder engagement activity timetable						
Stakeholder	Engagement purpose	Engagement technique	Engagement frequency	Date(s) and location	Activity owner	Activity progress
Owner/Director	Create/Consult	Working session	Daily	Ongoing	Myself (Owner)	50%
Community	Explore, share, listen	Social media	Weekly	August 2021 - online	Director	
Donors	Collaborate, listen, share	Email, social media	Monthly	Future date - online	Director	Once 501c3 designation confirmed, Donors will be able to contribute tax-free (Estimated - 2022)
State/Federal Government	Consult when needed	Offices/official website	As needed	June 2020 online; one and done	Director	100%
Project Sponsor	Listen, share	Email, Zoom, in-person	Once Per Semester (or more)	May 1, July 15, Dec 1 - status reports	Director	All previous status reports have been submitted; July 15 to be submitted on or before July 15

Monitoring and reporting

As Owner/Director, I will monitor all communication to stakeholders. Communication will be tracked via calendar appointments, email communications and social media post records. Once donations are received, all accounting reporting will be made available to necessary stakeholders to maintain compliance and follow regulatory guidelines of the State and Federal government. The Owner/Director is solely responsible for following up on any outstanding action. Communication plans will begin to be executed August 2021.

Evaluation

A review of the social media account(s) activity will occur monthly to determine how and when the community is engaging with the platform/account. The social media analysis will indicate the success of the communication through “likes” and comments. Once the company is set up for donations, I will be able to evaluate the amount of funds that are received, and services donated. Progress will be evaluated every 6 months to ensure optimal engagement with stakeholders.



Appendix E

Communication Plan

Stakeholder	Information Needed	Why Needed	When will they get it	How will they get it
<i>Owner/Director</i>	<i>Detailed knowledge of the organization; operations and donor information/resources</i>	<i>To articulate the purpose of the organization and the organization's needs to the community</i>	<i>Already have knowledge of organization</i>	<i>Developed by owner</i>
<i>Community</i>	<i>The name and purpose of the organization; education and health information</i>	<i>To advance the mission of the organization; to provide health education to Black women and encourage advocacy – for themselves and others</i>	<i>Weekly</i>	<i>Social media posts (Instagram, Facebook, Twitter)</i>
<i>Donors</i>	<i>Purpose of the organization, mission/vision; allocation of donated funds</i>	<i>For transparency - Donors will want to know where their funds are going and why they should donate to the cause</i>	<i>Weekly, Monthly</i>	<i>Social media posts and potential newsletter</i>
<i>State/Federal Government</i>	<i>Name of business; business purpose; Articles of Incorporation, Tax implications (Tax status)</i>	<i>To become a legal entity, recognized in the state of NC, with an EIN (tax ID) it must be approved by the local and federal government (IRS)</i>	<i>Already registered and established.</i>	<i>Articles of Incorporation have already been filed via the NC Sec of State website and EIN has been submitted for and received via the IRS forms online</i>
<i>Project Sponsor</i>	<i>Project progress</i>	<i>To monitor ongoing progress</i>	<i>Once per semester</i>	<i>Project Status Reports submitted</i>

Appendix F

CITI Certification



Completion Date 12-Feb-2021
Expiration Date 12-Feb-2024
Record ID 40356569

This is to certify that:

Chernee Gerald


Has completed the following CITI Program course:

Graduate School of Education Research Investigators
(Curriculum Group)
Graduate School of Education Research Investigators
(Course Learner Group)
1 - Basic Course
(Stage)

Under requirements set by:

Gardner-Webb University

Not valid for renewal of certification through CME.



Verify at www.citiprogram.org/verify/?wd8f80d5e-2a39-4cd2-99a1-28c37e66f758-40356569

Appendix G

Articles of Incorporation – Bet.Her Health, Inc.



NORTH CAROLINA
Department of the Secretary of State

To all whom these presents shall come, Greetings:

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

ARTICLES OF INCORPORATION

OF

BET.HER HEALTH, INC.

the original of which was filed in this office on the 1st day of June, 2021.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of June, 2021.

Elaine F. Marshall

Secretary of State

SOSID: 2204356
 Date Filed: 6/1/2021 2:50:00 PM
 Elaine F. Marshall
 North Carolina Secretary of State
 C2021 146 06942

State of North Carolina
 Department of the Secretary of State

ARTICLES OF INCORPORATION
 NONPROFIT CORPORATION

Pursuant to §55A-2-02 of the General Statutes of North Carolina, the undersigned corporation does hereby submit these Articles of Incorporation for the purpose of forming a nonprofit corporation.

1. The name of the nonprofit corporation is: Bet.HER Health, Inc.
2. (Check only if applicable.) The corporation is a charitable or religious corporation as defined in NCGS §55A-1-40(4).
3. The name of the initial registered agent is: Chernee M. Gerald
4. The street address and county of the initial registered agent's office of the corporation is:
 Number and Street: [REDACTED]
 City: Charlotte State: NC Zip Code: 28214-1031 County: Mecklenburg
 The mailing address *if different from the street address* of the initial registered agent's office is:
 Number and Street or PO Box: _____
 City: _____ State: NC Zip Code: _____ County: _____
5. The name and address of each incorporator is as follows:

Name	Address
Chernee M. Gerald	[REDACTED] Charlotte NC, 28214-1031 United States
6. (Check either "a" or "b" below.)
 - a. The corporation will have members.
 - b. The corporation will not have members.
7. Attached are provisions regarding the distribution of the corporation's assets upon its dissolution.
8. Any other provisions which the corporation elects to include are attached.

BUSINESS REGISTRATION DIVISION
 (Revised August, 2017)

P. O. BOX 29622

RALEIGH, NC 27626-0622
 Form N-01

9. The street address and county of the principal office of the corporation is:

Principal Office Telephone Number: _____ (704) _____

Number and Street: _____

City: Charlotte State: NC Zip Code: 28214-1031 County: Mecklenburg

The mailing address *if different from the street address* of the principal office is:

Number and Street or PO Box: _____

City: _____ State: _____ Zip Code: _____ County: _____

10. **(Optional):** Listing of Officers (See instructions for why this is important)

Name	Address	Title

11. **(Optional):** Please provide a business e-mail address: Privacy Redaction.
The Secretary of State's Office will e-mail the business automatically at the address provided at no charge when a document is filed. The e-mail provided will not be viewable on the website. For more information on why this service is being offered, please see the instructions for this document.
12. These articles will be effective upon filing, unless a future time and/or date is specified: _____

This is the 26th day of May, 2021.

Bet.HER Health, Inc.
Incorporator Business Entity Name

Chernee M. Gerald
Signature of Incorporator

Chernee M. Gerald Incorporator
Type or print Incorporator's name and title, if any

NOTES:

1. Filing fee is \$60. This document must be filed with the Secretary of State.

BUSINESS REGISTRATION DIVISION
(Revised August, 2017)

P. O. BOX 29622

RALEIGH, NC 27626-0622
Form N-01

Articles of Incorporation of Bet.HER Health, Inc.

The undersigned, citizen(s) of the United States, desiring to form a Non-Profit Corporation under the Non-Profit Corporation Law of North Carolina, do hereby certify:

First: The name of the Corporation shall be Bet.HER Health, Inc.

Second: The place in this state where the principal office of the Corporation is to be located is the City of Charlotte, Mecklenburg County.

Third: Said corporation is organized exclusively for charitable and educational purposes that qualify as exempt under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code. The specific purpose of the organization is to educate the public on issues related to women's health and advocating on behalf of those issues without attempting to influence legislation.

Fourth: The names and addresses of the person(s) who are the initial trustees of the corporation are as follows:


Name: Chernée M. Gerald Address: [REDACTED] Charlotte, NC 28214-1031

Fifth: No part of the net earnings of the corporation shall inure to the benefit of or be distributable to, its members, directors, officers, or other private persons except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of purposes set forth in these articles of incorporation. No substantial part of the activities of the corporation shall be the carrying on of propaganda or otherwise attempting to influence legislation, and the corporation shall not participate in or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provisions of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under Section 501(c)(3) of the Code or (b) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Code.

Sixth: Upon the dissolution of the corporation, after paying or making provision for the payment of all of the liabilities of the corporation, disposal of all of the assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code. Any such assets not so disposed of shall be disposed of by the Superior Court of Mecklenburg County, exclusively for such purposes or to such organizations, such as the court shall determine, which are organized and operated exclusively for such purposes, or to such governments for such purposes.

In witness whereof, we have hereunto subscribed our names this day of May 26, 2021.

Appendix H**Bet.Her Health, Inc. Fein**

 **IRS** DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

BETHER HEALTH
[REDACTED]
CHARLOTTE, NC 28214

Date of this notice: 06-15-2021

Employer Identification Number:
[REDACTED]

Form: SS-4

Number of this notice: CP 575 E

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN [REDACTED]. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

When you submitted your application for an EIN, you checked the box indicating you are a non-profit organization. Assigning an EIN does not grant tax-exempt status to non-profit organizations. Publication 557, Tax-Exempt Status for Your Organization, has details on the application process, as well as information on returns you may need to file. To apply for recognition of tax-exempt status under Internal Revenue Code Section 501(c)(3), organizations must complete a Form 1023-series application for recognition. All other entities should file Form 1024 if they want to request recognition under Section 501(a).

Nearly all organizations claiming tax-exempt status must file a Form 990-series annual information return (Form 990, 990-EZ, or 990-PF) or notice (Form 990-N) beginning with the year they legally form, even if they have not yet applied for or received recognition of tax-exempt status.

Unless a filing exception applies to you (search www.irs.gov for Annual Exempt Organization Return: Who Must File), you will lose your tax-exempt status if you fail to file a required return or notice for three consecutive years. We start calculating this three-year period from the tax year we assigned the EIN to you. If that first tax year isn't a full twelve months, you're still responsible for submitting a return for that year. If you didn't legally form in the same tax year in which you obtained your EIN, contact us at the phone number or address listed at the top of this letter.

For the most current information on your filing requirements and other important information, visit www.irs.gov/charities.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.** You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is BETH. You will need to provide this information, along with your EIN, if you file your returns electronically.

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter. Thank you for your cooperation.

Appendix I

Bet.Her Health, Inc. Logo



Appendix J

Professional Literature Review

Black Women's Health Disparities

Health has always been a topic of conversation for many. More specifically, women's health has been at the focal point of health education. However, in the last 10 years or more, there has been more and more examination into the disparities that exist in the health and healthcare of Black women and other women of the global majority and White women. The challenge becomes how can we educate historically underserved women and teach them to be advocates for their own health when no one is advocating for them. The research seeks to identify the factors that contribute to inequity in healthcare that Black women experience, the areas where Black women are suffering the most, and what support or services are needed to help alleviate the suffering.

To answer these questions, a review of over 10 journal articles, news and magazine articles, and news programs was conducted. The information overlapped in many areas, but the review revealed common themes that help answer the research questions and provide a solution to the issue at hand. The common themes are implicit bias/racism; quality of care: breast cancer and maternal mortality; and healthcare access and community support.

Literature Review

Implicit Bias/Racism

There has been much research conducted to identify why disparities in health exist. Implicit bias has been prevalent in the healthcare community. Physicians are believed to be trained to be impartial and take an oath to do no harm. However, "societal ideas about 'race' may be so deeply embedded in the fabric of both Black and White consciousness that they have

become influential within healthcare settings” (Sims, 2010, p. 499). This is in line with other researchers who believe implicit bias affects clinical judgment and behavior.

Twenty out of 25 assumption studies found that some kind of bias was evident either in the diagnosis, the treatment recommendations, the number of questions asked of the patient, the number of tests ordered, or other responses indicating bias against the characteristic of the patient under examination. (Fitzgerald & Hurst, 2017, p. 13).

This is very poignant evidence and speaks to the challenges Black women face when seeking healthcare. This adds to the idea that implicit bias is a major contributing factor to the treatment and care of Black women in medical environments.

It should be noted that although most research identifies implicit and explicit racial bias as having a significant impact on Black women’s health, other factors exist. There is evidence that suggests that other biases exist outside of race. For example, anti-fat bias, anti-smoking bias, and other characteristic biases. In addition, there are socioeconomic factors that are present in Black communities that contribute to the healthcare challenges seen in Black women. However, some argue that most of the socioeconomic data come down to systemic injustice, stereotypes, and outward appearances – how Black women look.

Systemic racism has played a role in the healthcare disparities that are seen today. Racial discrimination influences many today because it is built into our institutions. Knowing this further proves that educating Black women about preventative care and healthier lifestyles can act as a weapon to combat the healthcare experiences they are having due to racism.

Quality of Care: Breast Cancer and Maternal Mortality

There are two recurring medical tragedies that are prevalent among Black women: breast cancer and death during or from complications in childbirth (maternal mortality). Many Black

women experience inconsistent and inadequate care from physicians compared to White women. Although Black women are less likely than White women to have breast cancer, when they are diagnosed, the cancer is more aggressive. Researchers also point out that Black women are less likely to have adequate healthcare insurance and access to top medical facilities. This further confirms that the quality of care Black women receive is much different than that of White women. Black women are disproportionately poor and underinsured, giving them less access to new, innovative breast cancer treatments; not to mention the implicit bias and racism that is experienced when Black women do have sufficient health insurance and access to the best facilities.

“Black women in the United States from 2006 to 2010 were more than three times as likely to die a pregnancy related death than whites and Hispanic women (14.6% of live births but 35.5% of pregnancy related deaths)” (Eichelberger et al., 2016, p. 1771). According to other researchers, this happens because Black women are not listened to when they speak up about pain or discomfort. There are many cases where Black women have been ignored and not examined when expressing concern for their safety or the safety of their unborn children. Some suggest that this is a side effect of the Strong Black Woman (SBW) theory that has trickled over into the doctor’s office. In short, SBW is a race-gender theory that Black women are inherently strong, more independent, and natural caretakers. This stereotype, coupled with a physician’s racism or implicit bias, causes Black women not to be heard when they express pain or a need for help. The assumption is her pain level or suffering is not as bad as she describes; thus, her treatment is provided at the level of the physician’s assumption – insufficient or not at all.

Healthcare Access and Community Support

It has been expressed for many years that non-White communities live in neighborhoods that are food swamps/deserts, meaning there are no healthy, fresh food options. In addition, quality healthcare facilities are not available in these communities either. Access is key to the health of all people, particularly Black women. Access does not only include transportation; it is insurance, childcare, finances, and many other factors. A study on the medical spending and healthcare of Black and White households between 2013 and 2015 revealed that the healthcare disparity is shaped in part by barriers to accessing high-quality healthcare treatment that persist net of racial disparities in socioeconomic status and health insurance coverage (Kirby et al. 2006). Blacks residing in racially segregated neighborhoods, for example, have more difficulty accessing healthcare services in general. (Charron-Chénier & Mueller, 2018, p. 114)

If this is the case, it is necessary to provide access whenever and wherever possible in these communities.

A possible solution is to provide more charitable resources in communities that have been historically excluded from such resources. Studies have shown that “nonprofit and charitable health service providers serving low-income populations also tend to be less present in majority-black neighborhoods (Allard 2009)” (Charron-Chénier & Mueller, 2018, p. 114). Why is this? This provides an argument for more organizations in the nonprofit and charitable sectors to make their presence known in these communities. By providing resources, Black women can get the education and tools they need to become health advocates for themselves and their families.

“A recent report from the National Academies of Science, Engineering, and Medicine (NASEM) identified five essential activities for the integration of social needs into health care:

(1) awareness, (2) adjustment, (3) assistance, (4) alignment, and (5) advocacy” (Crear-Perry et al., 2021, p. 231). These social needs should be kept in mind when developing an organization to provide help and resources to Black women. Black women should be able to arm themselves with as much information and resources as possible to help them advocate for themselves when they encounter biased or racist physicians, are not receiving quality care, or need access to insurance or healthcare facilities.

Summary

Based on the existing research and information available regarding the health of Black women, it is evident that this is a major issue that needs to be addressed and resolved. Bias and racism are killing Black women. Quality treatment during pregnancy and childbirth is imperative to the health and lives of Black women. Breast cancer may not be as prevalent in Black women, but it is more aggressive. All women, regardless of race, should receive the same level and quality of treatment. Resources must be made available to Black women to educate them about health and encourage advocacy for themselves and their families. The challenge is to turn Black women into advocates. To do that, it is necessary to know who or what the opponent(s) are. The themes outlined in this paper help identify the opponent(s), how they work in concert, and what is needed to combat them.

References

- Bowen, G. (2009). Document analysis as a qualitative research method. *Qualitative Research Journal, 9*, 27-40. <https://doi.org/10.3316/QRJ0902027>
- Charron-Chénier, R., & Mueller, C. W. (2018). Racial disparities in medical spending: Healthcare expenditures for Black and White households (2013–2015). *Race and Social Problems, 10*(2), 113–133. <https://doi.org/10.1007/s12552-018-9226-4>
- Crear-Perry, J., Correa-de-Araujo, R., Lewis Johnson, T., McLemore, M. R., Neilson, E., & Wallace, M. (2021). Social and structural determinants of health inequities in maternal health. *Journal of Women's Health, 30*(2), 230–235. <https://doi.org/10.1089/jwh.2020.8882>
- Eichelberger, K. Y., Doll, K., Ekpo, G. E., & Zerden, M. L. (2016). Black lives matter: Claiming a space for evidence-based outrage in obstetrics and gynecology. *American Journal of Public Health, 106*(10), 1771–1772. <https://doi.org/10.2105/ajph.2016.303313>
- Fitzgerald, C., & Hurst, S. (2017). Implicit bias in healthcare professionals: a systematic review. *BMC Medical Ethics, 18*(1). <https://doi.org/10.1186/s12910-017-0179-8>
- Kloppenborg, T., Anantatmula, V. S., & Wells, K. (2018). *Contemporary project management* (4th ed.). Cengage Learning.
- Merriam, S. B., & Tisdell, E. J. (2017). *Qualitative research: A guide to design and implementation*. Langara College.

Oregon State University. (2017, July 8). *Snowball sampling*. Research Office.

<https://research.oregonstate.edu/irb/policies-and-guidance-investigators/guidance/snowball-sampling#:~:text=Snowball%20sampling%20is%20a%20recruitment,in%20identifying%20other%20potential%20subjects>

Sims, C. M. (2010). Ethnic notions and healthy paranoias: Understanding of the context of experience and interpretations of healthcare encounters among older Black women.

Ethnicity & Health, 15(5), 495–514. <https://doi.org/10.1080/13557858.2010.491541>

University of Southern California. (2021, March 18). *Organizing your social sciences research paper: Quantitative methods*. Research Guides.

<https://libguides.usc.edu/writingguide/quantitative>